PART B - FEE(S) TRANSMITTAL



omplete and send his form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

| | it, of | / . | | or <u>Fax</u> | (703) 746-4000 | ;iiia <i>22</i> 313 | -1430 | |
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| | INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. | | | | | | | |
| | CURRENT CORRESPONDENT 33031 7 | | Note: A certificate of Fee(s) Transmittal. Th papers. Each addition have its own certificat | mailing can out of the care of mailing can all paper, such e of mailing or | only be used for annot be used as an assignment transmission. | or domestic mailings of the for any other accompanying ent or formal drawing, must | | |
| | CAMPBELL ST 4807 SPICEWOO BLDG. 4, SUITE | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. | | | | | |
| 12. | /29/2004 EAREGAYZ 788 | 00030 502306 09 90486 | 24 | | Samuel G. C | ampbell | III | (Depositor's name) |
| 02 | FC:1504 300.00 DA FC:2501 700.00 DA FC:8001 9.00 DA | | | | December 20 | , 2004 | della | (Signature) |
| | APPLICATION NO. | FILING DATE | 1 | FIRST NAMED INVE | NTOR | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| | 09/904,824 07/12/2001 | | Horatio Lo | | XXXXXXXXXX | | 7988 | |
| | APPLN. TYPE | SMALL ENTITY | | I | PUBLICATION FEE | TOTAL FEE(S) DUE | | DATE DUE |
| ,~ | nonprovisional | YES | X\$X \$700 | X D | \$300 | \$1000 | | 12/20/2004 |
| | EXAMINER | | ART UN | IT (| CLASS-SUBCLASS |] | | |
| | SHIN, CHRISTOPHER B | | 2182 | | 710-002000 | | | |
| | Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Campbell Stephenson 1 Ascolese LLP 2 Samuel G. Campbell II | | | | |
| | "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | | | | | |
| | 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | |
| | (A) NAME OF ASSIGNEE Vicom Systems, Inc. | | | RESIDENCE: (CITY and STATE OR COUNTRY) Fremont, California | | | | |
| | Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | |
| | Issue Fee | | | A check in the amount of the fee(s) is enclosed. | | | | |
| | Publication Fee (No small entity discount permitted) | | | Payment by credit card. Form PTO-2038 is attached. | | | | |
| | Advance Order - # of Copies3 | | | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502306 (enclose an extra copy of this form). | | | | |
| | 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. | | | | no longer claiming SMA | LL ENTITY s | tatus. See 37 C | FR 1.27(g)(2). |
| | The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other parinterest as shown by the records of the United States Patent and Trademark Office. | | | | | | | ation identified above. he assignee or other party in |
| | Authorized Signature / MUMA | | | | Date/ | 2/20/ | | |
| | Typed or printed name Samuel G. Campbell III | | | | Registration | No42, | 381 | |
| | This collection of informati an application. Confidentia | ion is required by 37 CFR 1.3 lity is governed by 35 U.S.C | 11. The informatio | n is required to obta | in or retain a benefit by is estimated to take 12 | the public whi minutes to co | ch is to file (an | d by the USPTO to process) ng gathering, preparing, and |

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